

PATENT NUMBER

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| <p>O.I.P.E. <i>PM</i></p> <p>SCANNED <i>OK3</i> Q.A. <i>MM</i></p> | PATENT DATE |
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| <input type="checkbox"/> a) The term of this patent subsequent to _____ (date) has been disclaimed. | _____ (Assistant Examiner) (Date) | | NOTICE OF ALLOWANCE MAILED | |
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